

PART B - FEE(S) TRANSMITTAL

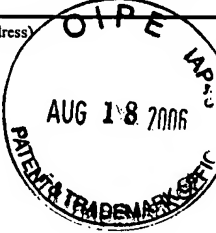
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27383 7590 05/18/2006

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Eunice K. Chang (Depositor's name)
 (Signature)
 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/810,535	03/26/2004	David M. Binder	7226-207	8973

TITLE OF INVENTION: FLEXIBLE SUPPORT FOR GEL WRAPS

08/21/2006 RHEBRAH1 00000038 500521 10810535

01 FC:2501 700.00 DA	02 FC:1504 300.00 DA	03 N. TYPE 300.00 DA	04 SMALL ENTITY	05 ISSUE FEE	06 PUBLICATION FEE	07 TOTAL FEE(S) DUE	08 DATE DUE
nonprovisional	YES			\$700	\$300	\$1000	08/18/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
GIBSON, KESHIA L	3761	604-307000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Drew M. Wintringham, III
 Clifford Chance US LLP
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Gelzone, Inc.

1928 Hickory Ridge Road
 Richmond, VA 23233

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0521 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 8/14/2006

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Registration No. 57,710

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